

## Proposed Fishing Plan for Motherships and Catcher/Processors Using Trawl Gear

CDQ Group Name: .....

Vessel Name:	Vessel contact information - Name of Person:
Federal Fisheries Permit #:	Mailing address:
ADF&G #:	
LOA:	Phone number:
Vessel type (Circle one)    Catcher/Processor                      FAX number: Mothership                                      e-mail address (not required):	
How many CDQ observers will be aboard this vessel during groundfish CDQ fishing?	

Method that will be used to determine CDQ and PSQ catch for this vessel (check one):

- \_\_\_\_\_ NMFS standard sources of data  
 \_\_\_\_\_ Alternative method described in attached proposal

Fishery (if information differs by fishery)	Area	Average (while CDQ fishing)			Maximum (while CDQ fishing)		
		# of Hauls	Weight (mt)	Time (hrs)	# of Hauls	Weight (mt)	Time (hrs)

(rev 4/18/00)